



## UNITED STATES PATENT AND TRADEMARK OFFICE

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UNITED STATES PATENT AND TRADEMARK OFFICE  
WASHINGTON, D.C. 20231  
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Bib Data Sheet

CONFIRMATION NO. 3553

SERIAL NUMBER 09/620,581	FILING DATE 07/20/2000  RULE	CLASS 280	GROUP ART UNIT 3627	ATTORNEY DOCKET NO. VEI0319 PUS
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APPLICANTS

Darius J. Preisler, Macomb, MI;

\*\* CONTINUING DATA \*\*\*\*\*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED  
\*\* 09/06/2000

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY MI	SHEETS DRAWING 2	TOTAL CLAIMS 4	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

ADDRESS  
22045  
BROOKS KUSHMAN P.C.  
1000 TOWN CENTER  
TWENTY-SECOND FLOOR  
SOUTHFIELD, MI  
48075

TITLE  
Occupant protection system for vehicle with air bag

FILING FEE  RECEIVED 690	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____
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Bib Data Sheet

<b>SERIAL NUMBER</b> 09/620,581	<b>FILING DATE</b> 07/20/2000 <b>RULE</b> -	<b>CLASS</b> 280	<b>GROUP ART UNIT</b> 3611	<b>ATTORNEY DOCKET NO.</b> VEI0319 PUS	
<b>APPLICANTS</b> Darius J. Preisler, Macomb, MI ; <i>none CRB</i> <b>** CONTINUING DATA *****</b> <b>** FOREIGN APPLICATIONS *****</b> <i>none CRB</i>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 09/06/2000</b> -					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met <i>Allowance</i> Verified and <i>Plano Y Buchanan</i> <i>CRB</i> Acknowledged Examiner's Signature Initials		<b>STATE OR COUNTRY</b> MI	<b>SHEETS DRAWING</b> 2	<b>TOTAL CLAIMS</b> 4	<b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> David R Syrowik Brooks & Kushman PC Twenty Second Floor 1000 Town Center Southfield ,MI 48075					
<b>TITLE</b> Occupant protection system for vehicle with air bag					
<b>FILING FEE RECEIVED</b> 690	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		